

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|-----------|----------------|
| FEE DETERMINATION | <i>to</i> | <i>12</i> | <i>6/30/01</i> |
| O.I.P.E. CLASSIFIER | | <i>12</i> | <i>4/25</i> |
| FORMALITY REVIEW | <i>wo</i> | <i>12</i> | <i>6/22/01</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 — Allowed
 — (Through numeral) Canceled
 — Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

BEST AVAILABLE COPY

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